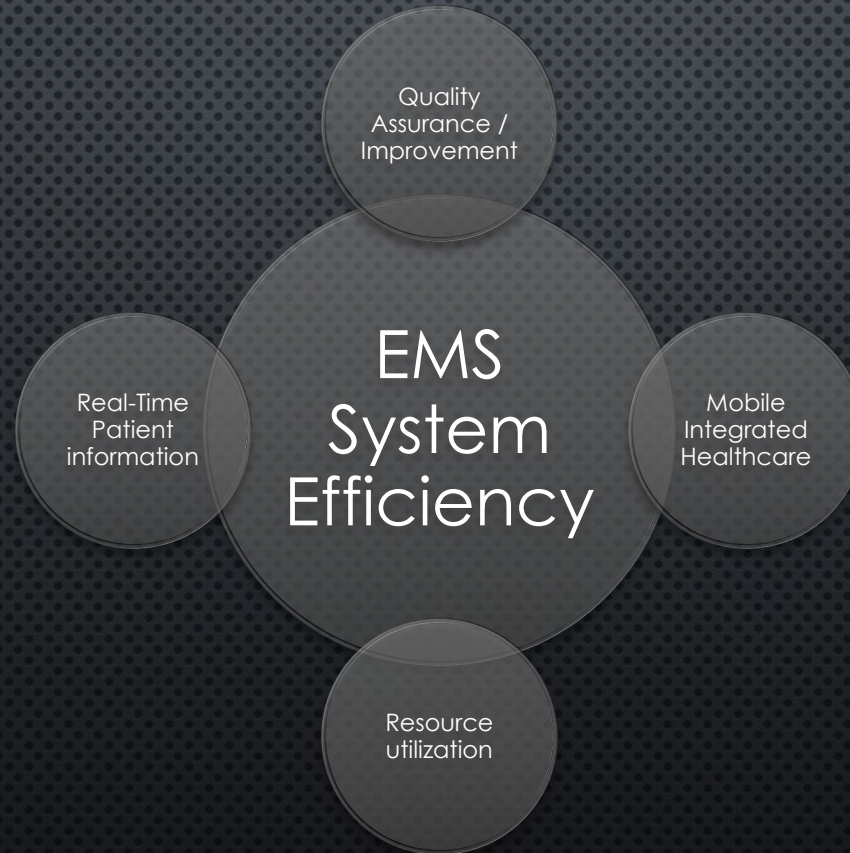


# **NATIONAL PRE-HOSPITAL & HOSPITAL DATA INTEGRATION LISTENING SESSION SUMMIT**

Brian J. Frankel  
Deputy Fire Chief  
Prince George's County Fire/EMS Department  
Maryland



# HIGH EFFICIENCY EMS MODEL





# Emergency Medical Services

Healthcare Systems

Medical Offices

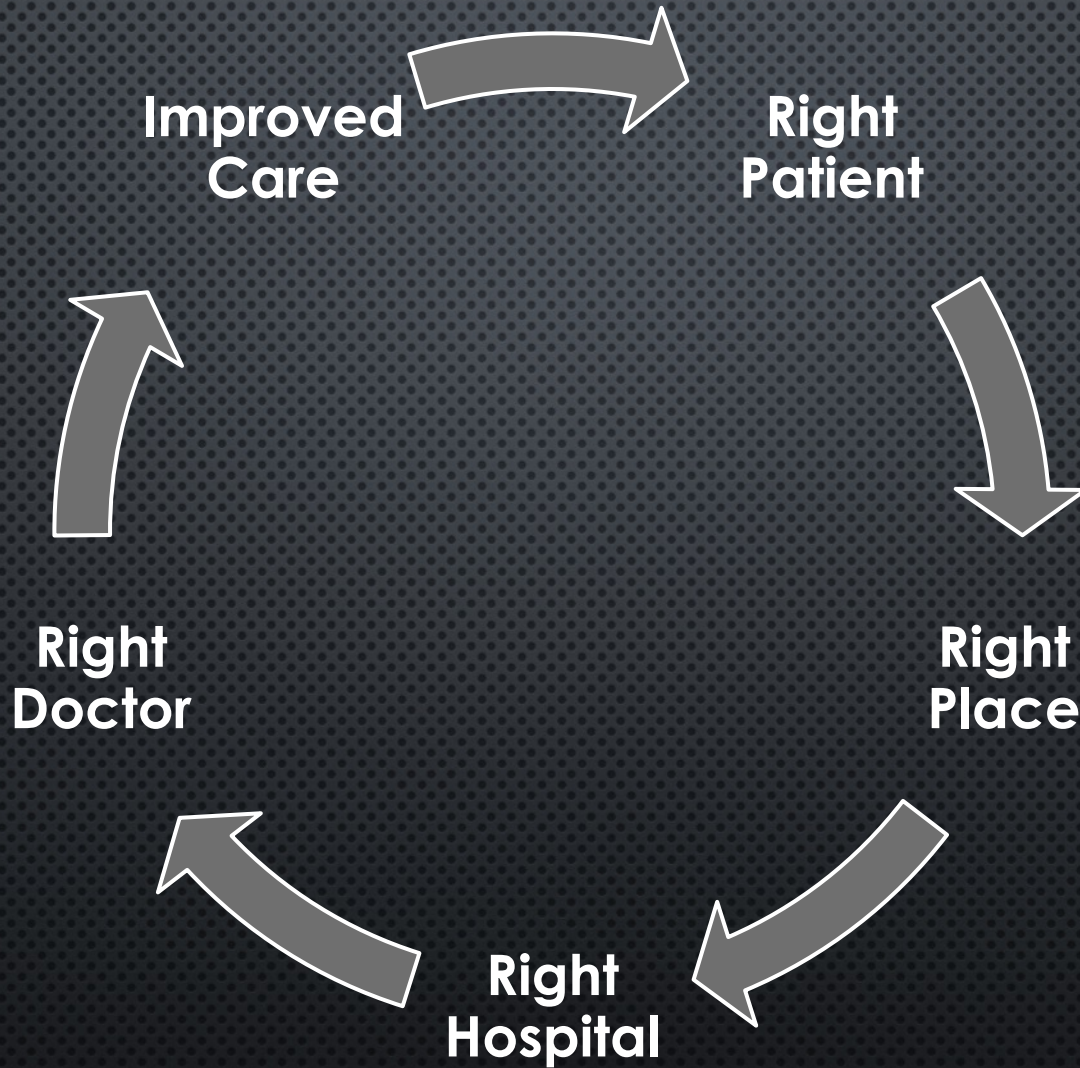
Longterm Care

Chesapeake Regional Information  
Services for our Patients (CRISP)

*Regional Health Information Exchange*



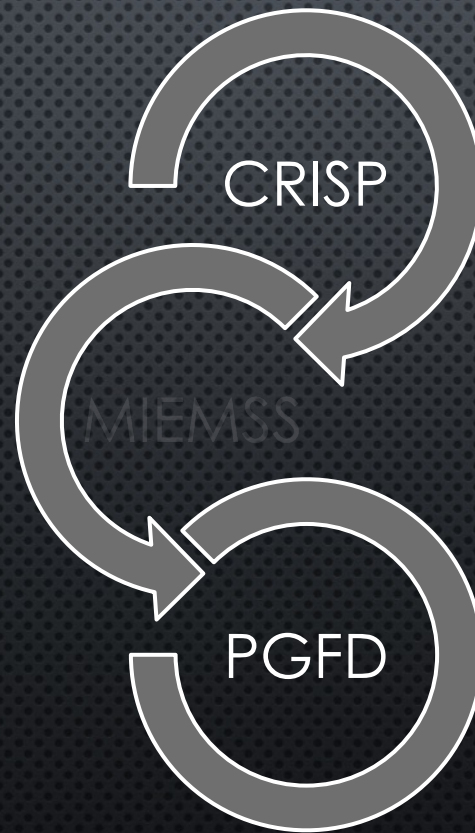




Healthcare vs. Transportation



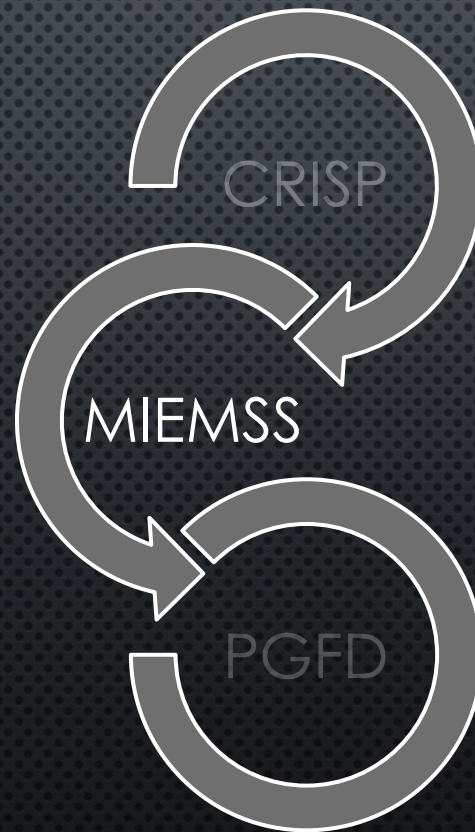
# BRIDGING THE DATA GAP





# BRIDGING THE DATA GAP

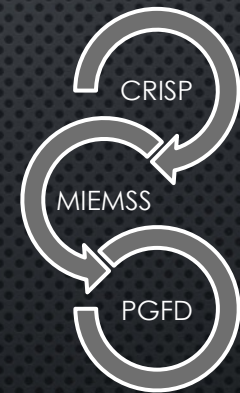
State EMS System





## CHALLENGES

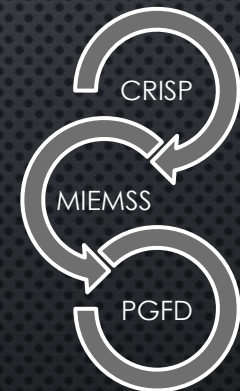
- Alignment of data
- EMS Access
- Accountability
- Use
- Benefits
- Obstacles





## LIMITED “**USE CASE**” PILOT

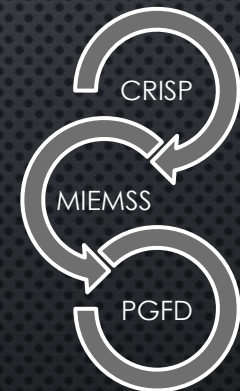
- Quality Assurance/Improvement focus
  - Outcomes
  - Treatment validation
  - Destination validation





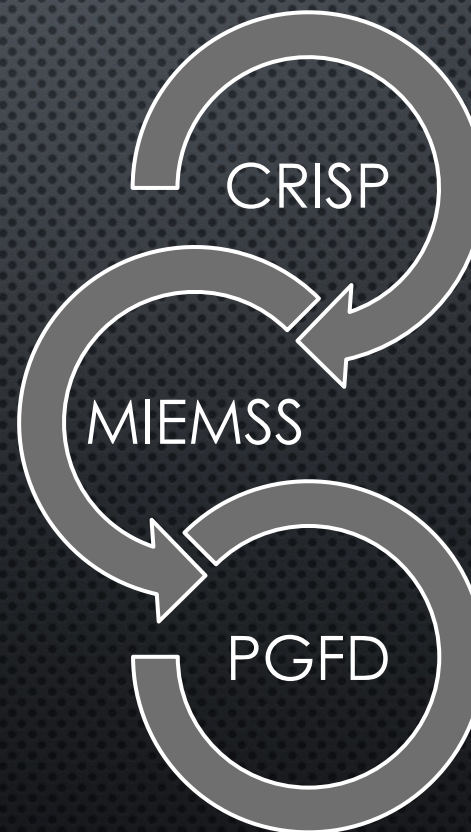
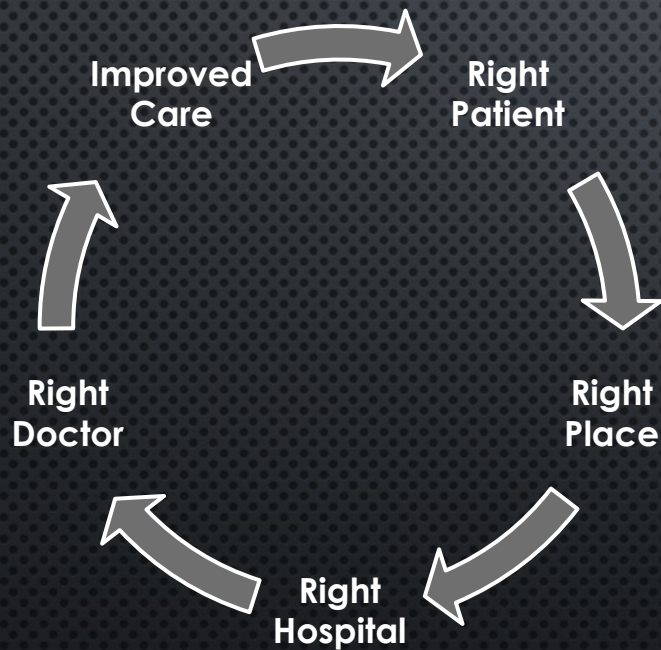
## MORE CHALLENGES ALONG THE PATH.....

- Credentialing
  - Limitations
- Availability of data
  - Delays
- Patients
  - What is their name?
- Terminology / Information alignment
  - i.e. Discharge without CPC information
  - Reperfusion times
  - Door to balloon times (EMS vs ED)





# OUTCOMES



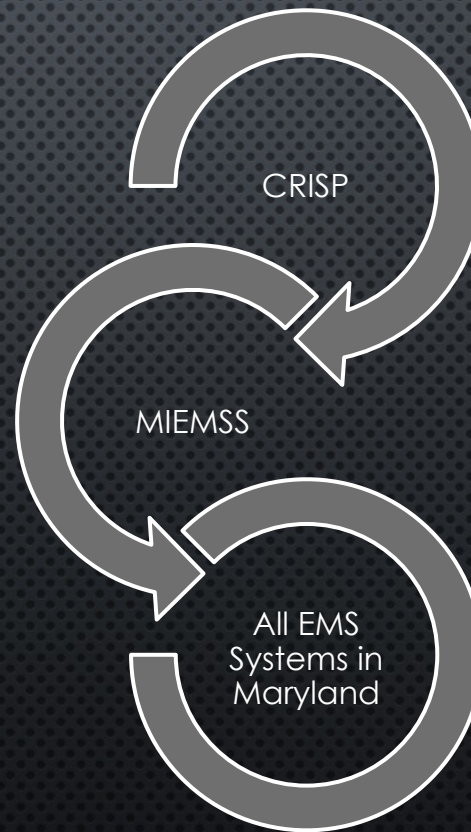


## NEXT STEPS

### Mobile Integrated Healthcare

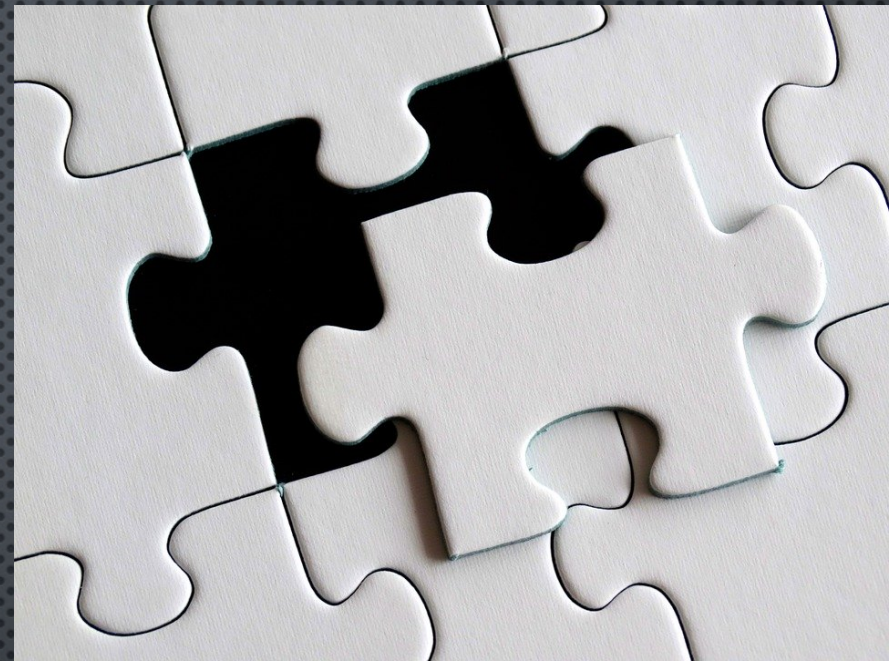
- Care Plans
- Care Access
- Treatment locations

Real-time Patient  
information  
(at bedside)





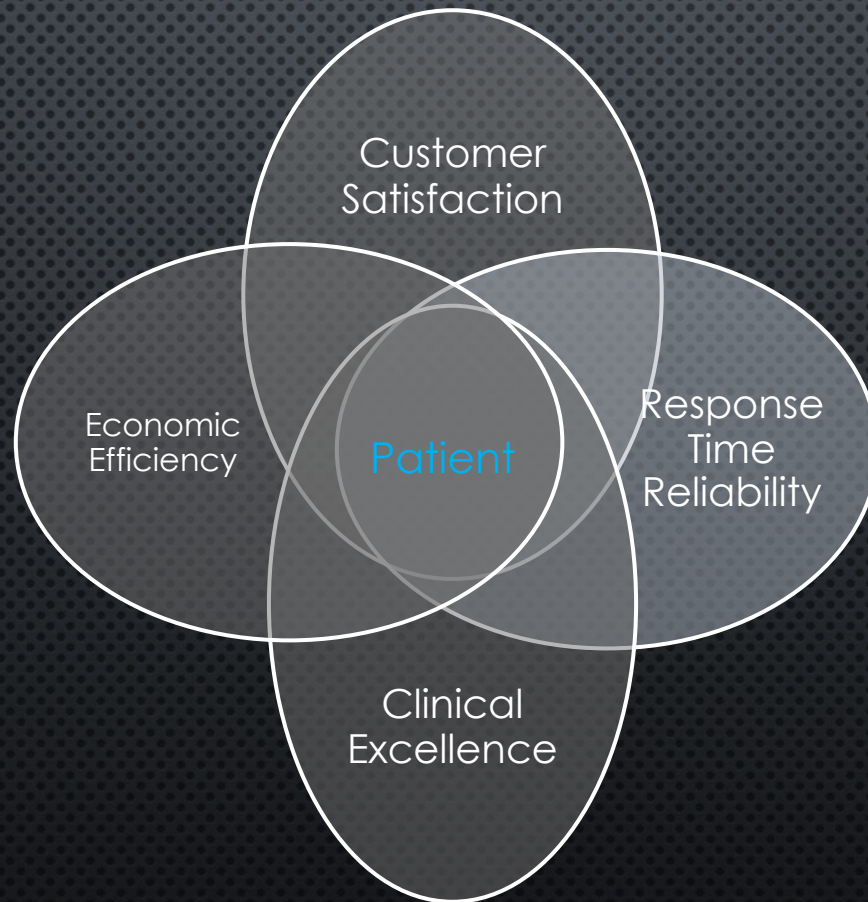
# TODAY



- **CONTRACT ISSUES**
  - **HOSPITAL CONTRACTS VS. EMS CONTRACTS**
- **FUNDING**
- **ALIGNMENT OF PATIENT INFORMATION BETWEEN AGENCIES**
- **PERFORMANCE MEASURES**





# HIGH PERFORMING EMS SYSTEM THAT IS NOW AN INTEGRAL PART OF THE HEALTHCARE SYSTEM





# THE INTEGRATION DATE WILL ENSURE THAT WE ARE BOTH EFFECTIVE AND EFFICIENT!

|               | Effective   | Not Effective   |
|---------------|---|---|
| Efficient     |  | D   |
| Not Efficient | C   |  |